PÀRT B - FEE(S) TRANSMITTAL

(3	DEC 11 7007	her with applicable	or <u>Faz</u>	Mail Stop ISSUE FE. Commissioner for Pa P.O. Bex 1450 Alexandria, Virginia (571)-273-2885.	22313-1450	·
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CHICAGO, II. 60	<b>1610</b> 2007 SSANDAR1 00	<b>ᲘᲘᲘᲘᲘ</b> Ვ 231925 10	669290	ransmitted to the USPTO (3	71) 273-2885, on the	s above, or being facsimile date indicated below.
i.			1	DAVID P. LINDN	ER ESQ.	(Depositor's came)
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APPLICATION NO.	FILING DATE	<del></del>	FIRST NAMED INVENT		ORNEY DOCKET NO.	CONFIRMATION NO.
10/669,290	09/24/2003		Timothy J. Shuttlewo		36/230 (P02069US)	6575
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	PREV. PAID ISSUE FEE	TOTAL FEE(S) DU	E DATE DUE
nonprovisional	NO	\$1400-1440	\$300	\$0	\$1700 174	12/18/2007
EXAMIN	IER	ART UNIT	CLASS-SUBCLASS			
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1.363).  Change of corresponders form PTO/SB/ ddress form PTO/SB/ TO/SB/47; Rev 03-02 damber is required.  SSIGNEE NAME AN' *LEASE NOTE: Unless	adence address (or Cha 122) attached. ation (or "Fee Address or more recent) attach D RESIDENCE DATA	A TO BE PRINTED ON	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for			
ecordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
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ase check the appropriate assignee category or categories (will not be printed on the patent):						
The following fee(s) are  Substance fee  Publication Fee (No Advance Order - # o	small entity discount p		b. Payment of Fee(s): (Please first reapply any previously paid lasue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form).			
Thange in Entity Status (from status indicated above)  3. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  3. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
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'yped or printed name _	DAVID P. LI	NDNER		Registration No	53,222	<del></del>
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